

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>9/25/01</i>
O.I.P.E. CLASSIFIER		<i>5-15-16-0</i>	
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>HA</i>	<i>358</i>	<i>8/15/01</i>
		<i>11471</i>	<i>11/14</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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8/16/01